POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DR	7059	106
O.I.P.E. CLASSIFIER		10	10-13-99
FORMALITY REVIEW	BH	21423	10-18-99

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral) Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim			Date							
Final	Original	3 5 04								
1	1	✔								
2	2	=								
3	3	=								
4	4	=								
5	5	=								
6	6	=								
7	7	=								
8	8	=								
9	9	=								
10	10	=								
11	11									
12	12	=								
13	13	✔								
14	14	=								
15	15	=								
16	16	=								
17	17	=								
18	18	=								
19	19	=								
20	20	=								
21	21	=								
22	22	=								
23	23	=								
24	24	=								
25	25	=								
26	26	=								
27	27	=								
28	28	=								
29	29	=								
30	30	=								
31	31	=								
32	32	=								
33	33	=								
34	34	=								
35	35									
36	36									
37	37									
38	38	✔								
39	39	=								
40	40	=								
41	41	=								
42	42	=								
43	43	=								
44	44	=								
45	45	=								
46	46	=								
47	47	=								
48	48	=								
49	49	=								
50	50	=								

Claim			Date							
Final	Original	3 5 04								
51	51	=								
52	52	=								
53	53	=								
54	54	=								
55	55	=								
56	56	=								
57	57	=								
58	58	=								
59	59	=								
60	60	=								
61	61	=								
62	62	=								
63	63	=								
64	64	=								
65	65	=								
66	66	=								
67	67	=								
	68									
	69									
	70									
	71									
	72									
	73									
	74									
	75									
	76									
	77									
	78									
	79									
	80									
	81									
	82									
	83									
	84									
	85									
	86									
	87									
	88									
	89									
	90									
	91									
	92									
	93									
	94									
	95									
	96									
	97									
	98									
	99									
	100									

Claim		Date								
Final	Original									
	110									
	112									
	113									
	114									
	115									
	116									
	117									
	118									
	119									
	110									
	111									
	112									
	113									
	114									
	115									
	116									
	117									
	118									
	119									
	120									
	121									
	122									
	123									
	124									
	125									
	126									
	127									
	128									
	129									
	130									
	131									
	132									
	133									
	134									
	135									
	136									
	137									
	138									
	139									
	140									
	141									
	142									
	143									
	144									
	145									
	146									
	147									
	148									
	149									
	150									

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)